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Facsimile Transmittal**DATE:** March 29, 2006**TO:** Commissioner for Patents**FAX NUMBER:** (571) 273-2885**FROM:** W. Chris Kim, Attorney for Applicant
Registration No. 40, 457**Total Number of Pages Sent:** 3 (including this transmittal cover sheet)

FILING BY FACSIMILE:**ATTORNEY DOCKET NO.:** 020248**ENCLOSED ARE:**

- Issue Fee Transmittal Form PTOL-85 (in duplicate)

APPLICANT: Gaal et al.**ASSIGNEE:** QUALCOMM Incorporated**SERIAL NO.:** 10/079,778**FILED:** February 19, 2002**FOR:** Channel Quality Feedback Mechanism and Method**EXAMINER:** Sanh D. Phn**ART UNIT:** 2682

Please contact Tram Q. Le at (858) 651-4463 if all pages do not transmit.

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Complete and send this form, together with applicable fee(s), to: Mail

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P.O. Box 1450
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QUALCOMM, INC
5775 MOREHOUSE DR.
SAN DIEGO, CA 92121

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Tram Q. Le

(Depositor's name)

(Signature)

March 29, 2006

(Date)

03/30/2006 TBESHAH2 00000032 170026 10079778

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/079,778	02/19/2002	Peter Gual	PA020248	7848

TITLE OF INVENTION: CHANNEL QUALITY FEEDBACK MECHANISM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/30/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
PHU, SANH D	2682	455-067130			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1 Philip R. Wadsworth

2 Thien T. Nguyen

3 W. Chris Kim

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Qualcomm Incorporated.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Diego, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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Authorized Signature

W. Chris Kim

Date March 29, 2006

Typed or printed name

W. Chris Kim

Registration No. 40, 457

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